

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>09/980027</u>	Examiner : <u>Le</u>	GAU : <u>2685</u>
From : <u>PAP</u>	Location : <u>IDC</u> FMF FDC	Date : <u>11/30/05</u>
Tracking #: <u>EPM 09/980027</u>		Week Date: <u>7/4/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>4/7/05</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>11/18/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claim 5 depends on renumbered claim 11 (original claim 4).

Original claim 10 depends on renumbered claim 11 (original claim 4). Please advise.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04